



Attorney Docket No. 5543.P005

Patent

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Patent Application of:)
J.J. Garcia-Luna-Aceves, et al.) Examiner: Siddiqi, Mohammad A.
Application No.: 09/844,857)) Art Unit: 2154
Filed: 04/26/2001))
For: SYSTEM AND METHOD FOR USING UNIFORM)
RESOURCE LOCATORS TO MAP APPLICATION)
LAYER CONTENT NAMES TO NETWORK)
LAYER ANYCAST ADDRESSES)

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

SUPPLEMENTAL AMENDMENT

Sir:

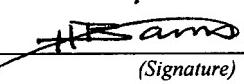
Please enter the following amendment as a supplement to the amendment filed June 29, 2007.

FIRST CLASS CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on

July 24, 2007
(Date of Deposit)

Harleen Bains
(Name of Person Mailing Correspondence)


(Signature)



FREE TRANSMITTAL for FY 2006

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)
180.00

Complete if Known

Application Number	09/844,857
Filing Date	April 26, 2001
First Named Inventor	J.J. Garcia-Luna-Aceves
Examiner Name	Siddiqi, Mohammad A.
Art Unit	2154
Attorney Docket No.	5543P005

METHOD OF PAYMENT (check all that apply)

- Check Credit card Money Order None Other (please identify): _____
- Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- | | |
|---|---|
| <input type="checkbox"/> Charge fee(s) indicated below | <input checked="" type="checkbox"/> Credit any overpayments |
| <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee | <input checked="" type="checkbox"/> Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged. |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) during the pendency of this application. | |

FEE CALCULATION

1. EXTRA CLAIM FEES

Total Claims	Fee Code (\$)	Extra Claims	Fee from below	Fee Paid
Independent Claims	7	20*	0 X 50.00 =	\$0.00
	1	3*	0 X 200.00 =	\$0.00
Multiple Dependent				

Large Entity		Small Entity		
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	360	2203	180	Multiple Dependent claim, if not paid
1204	790	2204	395	**Reissue independent claims over original patent
1205	300	2205	150	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (1)		(\$)		0.00

**or number previously paid, if greater, For Reissues, see below

2. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	85	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
2053	130	2053	130	Non-English specification	
1251	120	2251	60	Extension for reply within first month	
1252	450	2252	225	Extension for reply within second month	
1253	1,020	2253	510	Extension for reply within third month	
1254	1,590	2254	795	Extension for reply within fourth month	
1255	2,160	2255	1,080	Extension for reply within fifth month	
1401	500	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a public use proceeding	
1460	130	2460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify)					
SUBTOTAL (2)				(\$)	180.00

SUBMITTED BY

Complete (if applicable)

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Signature				Date	07/24/07